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APPLICANTS

Manfred Watzele, Weilheim, GERMANY;
 Bernd Buchberger, Peissenberg, GERMANY;
 Hans Schels, Munchen, GERMANY;
 Horst Menzler, Seeshaupt, GERMANY;
 Ulrike Fischer, Penzberg, GERMANY;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

GERMANY DE 203 05 570.5 04/07/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/21/2003

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY GERMANY	SHEETS DRAWING 3	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Met after Allowance	KM			
Verified and Acknowledged	Examiner's Signature Initials				

ADDRESS

23690

TITLE

Multichamber microdialysis device

FILING FEE RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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